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PLEASE TYPE OR PRINT	Entered previous May Show							
	Æl ves □ no							
☐ Ms.	VAL Yes 🗀 110							
Mr. Artist DAVID AL	LISON							
Permanent 320-6th St., Apt. 1, Elyria, OH Address								
Street	6 ₁ 322-3396							
Zip Area Coo	de							
Temporary or Studio Address								
Street	City							
Tel. ()							
Zip Area Cod	de							
If you do not presently live in one of the counties of the Western Reserve, which county were you born in? Collaborator								
(If Any)								
If May Show entries are not	May Show entries are not accepted or not sold:							
Artist will pick up at Museum. Museum should dispose of.								
							☐ Museum should ship to artist C.O.D. at this address:	
NZ 950277 19111111								
,	11110							
Special Instructions								
When necessary include below instructions or a drawing of								
how the object is to be assembled and displayed.								
Dee Duralos								
This entry blank must be fully made out and signed. Unsigned								

entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 17, 1983.

The submission of objects will be construed as acceptance of all conditions printed in the entry information

Signature

DO NOT DETACH

DO NOT WRITE IN ACCEPTED THIS SECTION REJECTED

REJECTED DATE

RECEIVED

ACCEPTED